भारत सरकार
Government of India

आधार

Aadhaar no. issued: 26/05/2016



Yash Kumar

Date of Birth/DOB: 26/11/2011

Male/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं ।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ ऑफ़लाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए ।

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

5704 1375 7890

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

AADHAAR

Details as on: 29/06/2026

Address:
S/O: Ravi Kumar, 6/285, BLOCK-6, TRILOK PURI, Patparganj, PO: Patparganj, DIST: East Delhi, Delhi - 110091

5704 1375 7890

VID : 9135 6191 6851 9566

1947 | help@uidai.gov.in | www.uidai.gov.in

22-Jan-21

Dr. Sagar

EEG → Generalized Epileptiform Discharges (2-4 Hz)

MRI (Br)

B/L parieto-occipital periventricular white matter signal changes c/s/o Glioma likely sequelae of previous insult

Old Epilepsy / TD / AIE

C/o Seizure episodes (Afebrile seizures)

Adv

① Tab LEVERA 500mg BD (1-0-1)

② Tab LACOSAMIDE 100mg BD (1-0-1)

③ Tab clobazam 5mg @ BD (1-0-1)

④ Tab prampanel 4mg OD (1-0-0)

(X Follow)

(Flap in A.O PM)

① Dengue Sgn explained

Dr. Ajay Kumar Dogra
Senior Resident
Department of Neurology

YASH KUMAR 20260003440 16-04-26
14/m NEURO (OLD)

K/C/O Epilepsy / JD / HTN

H/o Delay in above (1st Seizure - 2nd day of Lmp)

N/H/o Delayed delay

Int electrical disturbance

Currently on

- Levera 500mg BD
- Lacosamide 100mg BD
- Clobazam 5mg BD (1-0-1)
- T. Pramipexol 4mg OD. (0-0-1)

O/E

. Conscious

. following cmd.

. B/L pupil NSRSL.

. EOM - full.

c/o Seizure since 1 month.
(Above seizure).

(No H/o drug degen)

Adv

. Inj LEVERA 800mg I/V Stat

Institute of Human Behaviour and Allied Sciences (IHBAS)

(Hospital based Autonomous Academic Institute, Under GNCTD)
Dilshad Garden, Delhi-110095 Phone: 91-11-22114021, 29 & 32 ;
Website: ihbas.delhi.gov.in

ABHA Address : 91431504851772@abdm/ Abha No : 91-4315-0485-1772
पंजीकरण संख्या (Registration No (UHID)) : 20260003440
Last Visit Date : 09/02/2026 10.22 AM / टोकन संख्या (Token No) : 37
कमरा संख्या (Room No) : IHBAS,EMERGENCY,Ground,R.NO. 4

OUT PATIENT RECORD (Revisit Casualty)

नाम (Name) : **Mr. Yash Kumar / Marital Status : Single**
उम्र/ लिंग (Age/Sex) : **14Y 2M 14D / M**
विभाग (Department) : Casualty
विभाग पंजीकरण संख्या (Dept. Reg. No) : 20260003330
Unit : EMERGENCY NEUROLOGY
ईमेल (Email) :

पंजीकरण राशि (Registration Amount) : **Rs. 0**
मोबाइल नंबर (Mobile No) : 9868459708
पता (Address) :6/285 BLOCK-6 TRILOK PURI Patparganj Preet Vihar,EAST(DELHI)
पंजीकरण की तिथि (Date of Registration) : 09/02/2026 01.19 PM

पिन कोड (Pincode) :
Father's Name :
MLC Patient : NO

रोगी का प्रकार (Patient Type) : General
अभिभावक का नाम (Guardian Name) :

Brought By :
पेशा (Occupation) :
शिक्षा (Education) :
Remark :

नागरिकता (Citizenship) : INDIA

Purpose : Swasth Nari Sashakt Parivar Abhiyaan

Last Complete Collection Date/Amount : 14/01/2026 10.15 AM/Rs. 10

w/ 24/5

K/c/o epilepsy / IN / HIF K sine hosp

Acute, follow command

Sez - Dan : daily.

Pupil - B/L NSRL

Plan - I/V

Focal Impair awareness

TAB VREB 500 BD

Feb/26

Pt on Tab-Lacosamide 100-150 m./

Eff - generally epileptic drug

TS. Bolvacet 500 BD / TS. Perampanel 4mg/

TS - Esch CBZ 400 mg 1/2 tab HS /

TS. Clobaze 5mg HS

Adv

TS. Lacosamide 100 mg BD

Dr. Tevebuddhan

Nearest Jan Aushadhi Kendras : 1.Swami Dayanand Hospital, Dilshad Garden
2.Guru Teg Bahadur Hospital

Prepared By: Mr. Operator
Triage

Date Time: 09/02/2026 01.19 PM

09 FEB 2026

21/156/W

Epilepsy/ID/MIS

LSJ today 10:30 pm

no loss of consciousness

Review in SOP

16 FEB 2026

21/177/W

H/O — Epilepsy

Rx

30 tab. { CBZ x 30 tab. (1, 3, 4, 5) — Tb Levitiracetam 500 mg BD (1—1)

30 tab. { — Tb Lacosamide 100 mg BD — Levitiracetam 500 mg BD (1—x—1) — T. Rivotril 4 mg OD 1—x. — Clobazam 5 mg BD (1—1) — T. Escitalopram 10 mg 1/2 OD

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ABHA Address : 91431504851772@abdm/ Abha No : 91-4315-0485-1772
पंजीकरण संख्या (Registration No) : 20260003440
टोकन संख्या (Token No) : 16
कमरा संख्या (Room No) : IHBAS,OPD,Ground,OPD R.No.20
Doctor Days : MONDAY, WEDNESDAY, FRIDAY

21
180

NEW REGISTARTION

OUT PATIENT RECORD

नाम (Name) : **Mr. Yash Kumar / Marital Status : Single**
उम्र/ लिंग (Age/Sex) : **14Y 1M 19D / M**
विभाग (Department) : Neurology
विभाग पंजीकरण संख्या (Dept. Reg. No) : 20260001344
Unit : Unit II
ईमेल (Email) :

पंजीकरण राशि (Registration Amount) : **Rs. 10**
मोबाइल नंबर (Mobile No) : 9868459708
पता (Address) :6/285 BLOCK-6 TRILOK PURI Patparganj Preet Vihar,EAST(DELHI)
पंजीकरण की तिथि (Date of Registration) : 14/01/2026 10.15 AM
पिन कोड (Pincode) :
Father's Name :
MLC Patient : NO

रोगी का प्रकार (Patient Type) : General
अभिभावक का नाम (Guardian Name) : RAVI KUMAR(Father)

पेशा (Occupation) :
शिक्षा (Education) :
Remark :
Purpose : Swasth Nari Sashakt Parivar Abhiyaan

नागरिकता (Citizenship) : INDIA

K/C/O Epilepsy | ID | MRB

1 month

① T Lacosamide 100mg - BD
② T Brivaracetam 50mg - BD
③ T perampanel 4mg - OD
④ T Eslicarbazepine 400mg (½ tab) - OD
⑤ T Clobazam 5mg - HS

Dr. NADIR
Senior Resident
Department of Neurology
IHBAS, Delhi-110095

NEW REGISTARTION

Nearest Jan Aushadhi Kendras : 1.Swami Dayanand Hospital, Dilshad Garden
2.Guru Teg Bahadur Hospital

Date Time: 14/01/2026 10.15 AM

Prepared By: Mr. Aakash Kumar

R/C/O epilepsy / ID / HIE

→ Tab Eslizen 400 mg. 1/2 OD
→ Tab Lacosamide 100mg BD
→ Tab Perampanel 4 mg ON
→ Tab Levera 500mg BD. (1-1).
→ Tab Clobazam 5mg BD. (1-1½).

20 APR 2026

16/4/26

Dx:-
Anemia
Sz
EEG:- Generalised epileptiform (2-4 Hz) 1mo

Epilepsy - ID - HIE

1. Levera 500mg ⊢1
2. Lacosamide 100mg ⊢1
3. Clobazam 5mg BD ⊢1
4. Perampanel 4mg OD ⊢2
5. CBZ 200mg
½ — 1 — 3 day
↓
1 — 1 — 1. 27

Dr. SALONI KHATTAR
Senior Resident
Department of Neurology
IHBAS-110095

Institute of Human Behaviour and Allied Sciences (IHBAS)
(Hospital based Autonomous Academic Institute, Under GNCTD) Dilshad Garden, Delhi-110095 Phone: 91-11-22114021, 29 & 32 ; Website: ihbas.delhi.gov.in

ABHA Address : 91431504851772@abdm/ Abha No : 91-4315-0485-1772
पंजीकरण संख्या (Registration No (UHID)) : 20260003440
Last Visit Date : 20/04/2026 09.26 AM / टोकन संख्या (Token No) : 98
कमरा संख्या (Room No) : IHBAS,OPD,Ground,OPD R.No.21
Doctor Days : MONDAY, WEDNESDAY, FRIDAY

FOLLOW UP

OUT PATIENT RECORD (Follow Up)

नाम (Name) : **Mr. Yash Kumar / Marital Status : Single**
उम्र/ लिंग (Age/Sex) : **14Y 8M 1D / M**
विभाग (Department) : Neurology
विभाग पंजीकरण संख्या (Dept. Reg. No) : 20260001344
Unit : Unit II
ईमेल (Email) :

रोगी का प्रकार (Patient Type) : General
अभिभावक का नाम (Guardian Name) :

पेशा (Occupation) :
शिक्षा (Education) :
Remark :

Purpose : Swasth Nari Sashakt Parivar Abhiyaan

पंजीकरण राशि (Registration Amount) : **Rs. 10**
मोबाइल नंबर (Mobile No) : 9868459708
पता (Address) :6/285 BLOCK-6 TRILOK PURI Patparganj Preet Vihar,EAST(DELHI)
पंजीकरण की तिथि (Date of Registration) : 27/07/2026 09.21 AM

पिन कोड (Pincode) :
Father's Name :
MLC Patient : NO

नागरिकता (Citizenship) : INDIA
सालाना तनख्वाह (Yearly Income) : 0 to 19,999

Last Complete Collection Date/Amount : 14/01/2026 10.15 AM/Rs. 10

FVC of Epilepsy ε ID ε ME.

Rx:

T. Levera 500 mg
1 — 0 — 1

T. Lacosamide 100 mg
1 — 0 — 1

T. Clobazam 10 mg BD
1/2 — 0 — 1

T. perampanel 4 mg OD

T. CBZ 200 mg
1 — 0 — 0

Urs: 2 days ade
Absence seizure (+) (10 seconds)
- Behavioural arrest (+)
- focal (R) ε impaired awareness.

- Any default (-)
- (+) sleep
- seizure.

FOLLOW UP

Nearest Jan Aushadhi Kendras : 1.Swami Dayanand Hospital, Dilshad Garden
2.Guru Teg Bahadur Hospital

X 1 month.

Prepared By: Mr. Ajay Kumar

Dr. AISWINI SARAN
Senior Resident
Dept. of Neurology
IHBAS

Date Time: 27/07/2026 09.21 AM

H·O·D
HOUSE of DIAGNOSTICS
Experience care

NABH Accredited
Medical Imaging Services
MIS-2016-0027

Lab Serial No.	: **011907002100**	Category	: GENERAL
Patient Name	: **Master. YASH KUMAR**	Reg. Date	10-Jul-19 11:30 AM
Age/Sex	: 7 YRS / M	Sample.coll.Date	:
Referred By	: **Dr. RAJNISH KUMAR**	Report Date	: 11-Jul-2019 10:48AM
TestName	: EEG		
Center	: 15 Hargovind Enclave, Delhi - 110092		

EEG [ELECTROENCEPHALOGRAPH] REPORT

STUDY PROTOCOLS:
This is a sleep interictal EEG record using 10-20 system of electrode placements

FINDINGS:

Background rhythm shows generalized background theta waves at 4-7 Hz with intermittent delta activity.

There are epileptiform activity seen in the tracing in the form of generalized 2-4 Hz slow waves changes lasting for 1-2 seconds.

IMPRESSION: THIS IS A ABNORMAL SLEEP INDUCED EEG RECORD SUGGESTIVE OF GENERALIZED EPILEPTIFORM DISCHARGES

ADVISE: Please correlate results clinically.

*** End Of Report ***

In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.

H·O·D

HOUSE of DIAGNOSTICS

Experience care

NABH Accredited
Medical Imaging Services

MIS-2016-0027

Lab Serial No.	: **011907002100**	Category	: GENERAL
Patient Name	: **Master. YASH KUMAR**	Reg. Date	10-Jul-19 11:30 AM
Age/Sex	: 7 YRS / M	Sample.coll.Date	:
Referred By	: **Dr. RAJNISH KUMAR**	Report Date	: 10-Jul-2019 02:34PM
TestName	: MRI BRAIN / HEAD		
Center	: 15 Hargovind Enclave, Delhi - 110092		

Both orbits are normal.

IMPRESSION:-

Area of T2W/FLAIR hyperintensity is seen in bilateral parieto-occipital periventricular white matter region with adjacent volume loss - s/o Gliosis likely sequelae of perinatal insult.

ADVISED: CLINICAL CORRELATION.

*** End Of Report ***

In case of any discrepancy due to typing error, kindly get it rectified immediately. This is professional opinion, not a diagnosis.

H·O·D
HOUSE of DIAGNOSTICS
Experience care

NABH Accredited
Medical Imaging Services
MIS-2016-0027

Lab Serial No.	: **011907002100**	Category	: GENERAL
Patient Name	: **Master. YASH KUMAR**	Reg. Date	10-Jul-19 11:30 AM
Age/Sex	: 7 YRS / M	Sample.coll.Date	:
Referred By	: **Dr. RAJNISH KUMAR**	Report Date	: 10-Jul-2019 02:34PM
TestName	: MRI BRAIN / HEAD		
Center	: 15 Hargovind Enclave, Delhi - 110092		

MRI BRAIN

STUDY PROTOCOLS:

FLAIR T1W AND FAST SPIN ECHO T2W HIGH RESOLUTION AXIAL IMAGES OF BRAIN WERE OBTAINED ON A HIGH RESOLUTION DEDICATED PHASED ARRAY SURFACE COIL USING TWIN GRADIENT 8 CHANNEL HIGH DENSITY 1.5 TESLA SYSTEM WITH ZOOM GRADIENT COIL AND CORRELATED WITH T2W SAGITTAL,CORONAL, FLAIR AND DIFFUSION AXIAL IMAGES. NO CONTRAST WAS GIVEN. (TOTAL NUMBER OF FILMS - 4).

Clinical History: Seizure.

SUPRATENTORIAL:

Area of T2W/FLAIR hyperintensity is seen in bilateral parietooccipital periventricular white matter region with adjacent volume loss.

Rest of cerebral parenchyma is normal in signal intensity with maintained grey and white matter differentiation. No diffusion restriction is seen on DWI. No evidence of blooming is seen on GRE.

Bilateral basal ganglia and thalami are normal in volume and signal intensity.

Ventricles are normal in shape, size outline and volume. Septum is in midline.

Basal cisterns and sylvian fissures are normal.

Sella and parasellar region are normal.

POSTERIOR FOSSA:

Brainstem is central and normal in signal intensity.

Fourth ventricle is central and normal.

Cerebellum is normal in signal intensity.

Major intracranial flow voids preserved.

Dr. Anmol Nigam
Senior Consultant Radiologist
M.B.B.S., M.D. (Radio-Diagnosis)
Ex-Senior Resident, AIIMS
DMC Reg. No. 48201

PATIENT ID:- 2226	**DATE:- 27TH FEBRUARY, 2025**
PATIENT NAME: MAST. YASH KUMAR	**SEX/AGE:- 13YRS/ MALE**
REF DOCTOR:- DR. RAHUL CHAUHAN	**TEST NAME:-EEG ROUTINE**

EEG REPORT

History: - ? Seizure.

EEG Protocol: -

Duration of EEG record: 20 minutes.

Awake EEG record was done under 10- 20 International Electrode placement used with bipolar longitudinal, transverse and monopolar montages. Hyperventilation and Photic stimulation was used as activation procedures.

Observations:

Background rhythm of the record shows 8-9Hz 20-40uV posterior dominant alpha activity symmetrically, synchronous to reacting eye opening.

Intermittent generalized sharp and slow wave discharges seen in between the recording.

Movement, electrode and eye blink artifacts are seen in between recording.

Same discharges are seen on hyperventilation and Photic stimulation.

Impression: - Abnormal awake EEG record suggestive of generalized epileptiform discharges.

Please correlate clinically and radiologically.

Dr. Rahul Chauhan
MBBS, MD, DNB (Neurology)
Consultant Neurologist

DEPARTMENT OF PAEDIATRICS
ABVIMS&DR.RML HOSPITAL
NEW DELHI

EEG REPORT
PATIENT INFORMATION

Name Yash Kumar
Previous EEG181/22
History -

Age10 y/m
SexMale
Examination Date09-03-2022

TEST INFROMATION

Referring Doctor:
Test Location:
HV Effort:
State of consciousness:
Tech.comments:

Reporting Doctor: Dr Deepak sachan
Sedation during test:
Photic Driving Response:
Technologist:

INTERPRETATION

Background activity in postero –central leads consists of 9-11.Hz 40-80.uv,posterior dominant,bilaterally symmetrical,sysnchronous alpha activity attenuating on eye opening.

Frontal leads on both sides shows persistent slowing in the range of theta frequency

Hyperventilation and photic stimulation ware non-contributory.

There are 3-4 Hz spike and wave epileptiform discharge seen from T6o2 with 2nd gen. beta contamination

IMPRESSION

Abnormal awake record s/o right temporo-occipital discharges

Consultant incharge
Deapartment of pediatrics(Neurology division)

PROCESSED AT :
Thyrocare
260 - 261, Tribhuvan Complex,
Ishwar Nagar,
New Delhi - 110 065

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : YASH KUMAR (12Y/M)
REF. BY : DR PRAVEEN KUMAR
TEST ASKED : HEMOGRAM
PATIENTID : YM15179305

HOME COLLECTION :
LIFE CARE DIAGNOSTIC CENTRE - 110091

TEST NAME	VALUE	UNITS	REFERENCE RANGE
TOTAL LEUCOCYTES COUNT (WBC)	7.67	X 10^3 / µL	5.0- 13.0
NEUTROPHILS	58.4	%	40-75
LYMPHOCYTE PERCENTAGE	35.2	%	25-54
MONOCYTES	3.3	%	2-10
EOSINOPHILS	2.5	%	1-6
BASOPHILS	0.3	%	0-1
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.3	%	0.0-0.5
NEUTROPHILS - ABSOLUTE COUNT	4.48	X 10^3 / µL	2.0-8.0
LYMPHOCYTES - ABSOLUTE COUNT	2.7	X 10^3 / µL	1.0-5.0
MONOCYTES - ABSOLUTE COUNT	0.25	X 10^3 / µL	0.2-1.0
BASOPHILS - ABSOLUTE COUNT	0.02	X 10^3 / µL	0.01-0.1
EOSINOPHILS - ABSOLUTE COUNT	0.19	X 10^3 / µL	0.1-1.0
IMMATURE GRANULOCYTES(IG)	0.03	X 10^3 / µL	0.0-0.03
TOTAL RBC	4.08	X 10^6/µL	4.0-5.2
NUCLEATED RED BLOOD CELLS	0.01	X 10^3 / µL	<0.01
NUCLEATED RED BLOOD CELLS %	0.01	%	<0.01
HEMOGLOBIN	**11.2**	**g/dL**	**11.5-15.5**
HEMATOCRIT(PCV)	36.6	%	35.0-45.0
MEAN CORPUSCULAR VOLUME(MCV)	89.7	fL	77.0-95.0
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	27.5	pq	25.0-33.0
MEAN CORP.HEMO.CONC(MCHC)	**30.6**	**g/dL**	**31.0-37.0**
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	**47.4**	**fL**	**39-46**
RED CELL DISTRIBUTION WIDTH (RDW-CV)	**14.5**	**%**	**11.6-14.0**
PLATELET DISTRIBUTION WIDTH(PDW)	13.9	fL	9.6-15.2
MEAN PLATELET VOLUME(MPV)	**11.5**	**fL**	**7.5-8.3**
PLATELET COUNT	286	X 10^3 / µL	170-450
PLATELET TO LARGE CELL RATIO(PLCR)	38.1	%	19.7-42.4
PLATELETCRIT(PCT)	0.33	%	0.19-0.39

Remarks : Alert!!! Predominantly normocytic normochromic with ovalocytes. Platelets:Appear adequate in smear.

Please Correlate with clinical conditions.
Method : Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)
(This device performs hematology analyses according to the Hydrodynamic Focussing (DC method), Flow Cytometry Method (using a semiconductor laser), and SLS- hemoglobin method)

Sample Collected on (SCT) : 16 May 2023 10:20
Sample Received on (SRT) : 16 May 2023 14:15
Report Released on (RRT) : 16 May 2023 15:00
Sample Type : EDTA
Labcode : 1605078455/AH007
Barcode : J7803677

Dr Neha Prabhakar MD(Path)

WORLD BRAIN CENTER HOSPITAL

Pankha Road, OPP. Janak Cinema, Dabri,Crossing, New Delhi-45

Phone-: 25393347,25381266

Medicaid

EEG & BRAIN MAP ANALYSIS

Patient No : 048
Name : BABY YESH
Address :

Date : 13/08/2019 20:34:00
Age : 07YRS Years (M)
Consult :

Last Meal :

Last Attack :

Cooperation :

Handedness :

Medication :

History:

Observation: ELECTROENCEPHALOGRAM (EEG)

*Awake EEG record done, using 10-20 international system of electrode placement.

*Hyperventilation and photic used as provocative procedures.

*Background activity consists of 8-9 HZ, 20-100 microvolt alpha activity which is sinusoidal, responsive to eye opening with occipital dominance symmetrical and synchronous.

*Record show no seizure activity

Photic stimulation and hyperventilation do not contribute any further.

Impression: Normal awake record.

(Please Correlate EEG Report Clinically)

DR. SUDHIR KHETARPAL(M.D)

Immuno Diagnostics Pvt. Ltd.

Leading Immuno Assays Laboratory of Northern India

NABL ACCREDITED & ISO 9001:2015 CERTIFIED LABORATORY

NABL ACCREDITED
MC-2307

CB 004

Reference No.	: - 1912000816	Age/Gender	: 8 Yrs/Male
Pt's Name	: Master. YASH KUMAR		
Referred By	: Dr. NEELESH TIWARI		NOD-KUK
Sample Collection Date/Time	: 02-Dec-2019	Date	:02-Dec-2019
Sample Receiving Date/Time	: 02-Dec-2019 04:12PM	Approvel Date	:02-Dec-2019 04:30PM
Sample From	: Kukreja Hospital	Report Print Time	:02-Dec-2019 05:18PM

Test Description	Observed Value	Biological Reference Interval
	BIOCHEMISTRY	
Sodium Indirect Ion-Selective Electrode (ISE)	135.1	136.0-145.0 mEq/L

CLINICAL USE: Disturbances in acid base and water balance are typically reflected in the sodium concentration.

*** End Of Report ***

PROCESSED AT :
Thyrocare
D-37/1,TTC MIDC,Turbhe,
Navi Mumbai-400 703

CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS

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022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : YASH KUMAR (10Y/M)
REF. BY : SELF
TEST ASKED : 25-OH VITAMIN D (TOTAL),LIVER FUNCTION TESTS,VALPROIC ACID

SAMPLE COLLECTED AT :
(1100966342),NAMITA HEALTH PATH LAB,C 1/185, PRAGATI MARG, BLOCK D, NEW KONDLI, BLOCK D, NEW KONDLI, KONDLI, NEW DELHI.,110096

TEST NAME	TECHNOLOGY	VALUE	UNITS
VALPROIC ACID	**C.L.I.A**	**106.8**	**µg/ml**

Reference Range :-

Therapeutic range: 50 - 100 µg/ml

Therapeutic Significance :

Valproic acid is used primarily in the treatment of simple and complex absence seizures. It can be administered alone or in combination with other drugs such as phenobarbital or phenytoin. Valproic acid circulates mainly bound to protein. It completes with phenytoin for protein-binding sites. It also inhibits the renal clearance of phenobarbital. When valproic acid and phenobarbital are used in combination, the concentration of phenobarbital can be increased by up to 40 percent. Concentrations should be monitored to help maintain an effective dosage and prevent side effects caused by an excessive concentration. For diagnostic purpose, results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

Specifications:

Precision: Intra assay (%CV): 5.4 %, Inter assay (%CV): 4.4% & Sensitivity: 1µg/ml

External quality control program participation:

College of American pathologists (CAP): general chemistry and TDM survey.
CAP certification number: 7193855-01

Kit validation references :

Taylor WJ,FinnAl,eds. Individualizing Drug Therapy .Practical Applicationsof Drug Monitoring ,Vol-2.New York ,NY Townsend and Frank, Inc: 1981:87-10

Please correlate with clinical conditions.
Method:- Fully Automated Chemi Luminescent Immuno Assay

Sample Collected on (SCT) : 10 Jan 2021 10:10
Sample Received on (SRT) : 11 Jan 2021 01:43
Report Released on (RRT) : 11 Jan 2021 05:25
Sample Type : SERUM
Labcode : 1001042682/PU353
Barcode : Q2011353

Dr.Prachi Sinkar MD(Path)

Dr.Caesar Sengupta MD(Micro)

PROCESSED AT :
Thyrocare
D-37/1,TTC MIDC,Turbhe,
Navi Mumbai-400 703

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022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : YASH KUMAR (10Y/M)
REF. BY : SELF
TEST ASKED : HEMOGRAM

SAMPLE COLLECTED AT :
(1100966342),NAMITA HEALTH PATH LAB,C 1/185, PRAGATI MARG, BLOCK D, NEW KONDLI, BLOCK D, NEW KONDLI, KONDLI, NEW DELHI.,110096

TEST NAME	VALUE	UNITS	REFERENCE RANGE
TOTAL LEUCOCYTES COUNT	**5.22**	**X 10³ / µL**	**5.7-9.9**
NEUTROPHILS	47.2	%	38.8-76.7
LYMPHOCYTE PERCENTAGE	42.3	%	8.0-45.0
MONOCYTES	**3.8**	**%**	**4.0-8.0**
EOSINOPHILS	**5.2**	**%**	**2.0-4.0**
BASOPHILS	**1.3**	**%**	**0.0-1.0**
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.2	%	0.0-0.5
NEUTROPHILS - ABSOLUTE COUNT	**2.46**	**X 10³ / µL**	**2.8-6.3**
LYMPHOCYTES - ABSOLUTE COUNT	2.21	X 10³ / µL	1.2-2.7
MONOCYTES - ABSOLUTE COUNT	**0.2**	**X 10³ / µL**	**0.3-0.9**
BASOPHILS - ABSOLUTE COUNT	0.07	X 10³ / µL	0.0-0.1
EOSINOPHILS - ABSOLUTE COUNT	**0.27**	**X 10³ / µL**	**0.0-0.2**
IMMATURE GRANULOCYTES(IG)	0.01	X 10³ / µL	0.0-0.3
TOTAL RBC	4.31	X 10^6/µL	3.85-4.75
NUCLEATED RED BLOOD CELLS	Nil	X 10³ / µL	<0.01
NUCLEATED RED BLOOD CELLS %	Nil	%	<0.01
HEMOGLOBIN	11.7	g/dL	11-13.3
HEMATOCRIT(PCV)	**38.3**	**%**	**31.5-38**
MEAN CORPUSCULAR VOLUME(MCV)	**88.9**	**fL**	**78.2-83.9**
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	**27.1**	**pg**	**27.5-29.7**
MEAN CORP.HEMO.CONC(MCHC)	**30.5**	**g/dL**	**34.4-35.8**
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	45.3	fL	39-46
RED CELL DISTRIBUTION WIDTH (RDW-CV)	13.9	%	11.6-14.0
PLATELET DISTRIBUTION WIDTH(PDW)	**21.2**	**fL**	**9.6-15.2**
MEAN PLATELET VOLUME(MPV)	**14.2**	**fL**	**7.4-8.1**
PLATELET COUNT	**146**	**X 10³ / µL**	**227-350**
PLATELET TO LARGE CELL RATIO(PLCR)	**58.6**	**%**	**19.7-42.4**
PLATELETCRIT(PCT)	0.21	%	0.19-0.39

Remarks : ALERT !!! Platelet mildly reduced

Please Correlate with clinical conditions.
Method : Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)
(This device performs hematology analyses according to the Hydrodynamic Focussing (DC method), Flow Cytometry Method (using a semiconductor laser), and SLS- hemoglobin method)

~~ End of report ~~

Sample Collected on (SCT) : 10 Jan 2021 10:10
Sample Received on (SRT) : 11 Jan 2021 01:56
Report Released on (RRT) : 11 Jan 2021 02:41
Sample Type : EDTA
Labcode : 1001043251/PU353
Barcode : N6963170

Dr.Prachi Sinkar MD(Path)

Dr.Caesar Sengupta MD(Micro)

राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार
भारत
Government of
National Capital Territory of Delhi
INDIA

पूर्वी दिल्ली नगर निगम
East Delhi Municipal Corporation

फार्म संख्या / FORM NO.
(नियम संख्या 8 देखिए) / *(See Rule-8)*

BIRTH

प्रमाण–पत्र / CERTIFICATE

(जन्म एवं मृत्यु पंजीकरण अधिनियम 1969 की धारा 17 के अंतर्गत दिया गया)
(Issued under section 17 of the Registration of Births and Deaths Act, 1969)

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना मूल लेख से ली गई है जो कि BIRTH
This is to certify that the following information has been taken from the original record of

रजिस्टर में उल्लिखित है (स्थानीय क्षेत्र) SH. SOUTH ZONE Office के SH. SOUTH क्षेत्र,
which is register for (Local Area) ZONE of Zone of

पूर्वी दिल्ली नगर निगम के जिला Delhi के रा. रा. क्षेत्र, दिल्ली।
East Delhi Municipal Corporation of District of NCT of Delhi.

नाम / Name : YASH KUMAR

लिंग / Gender : Male

तिथि / Date of birth : 26/11/2011

स्थान / Place of birth : KUKREJA HOSPITAL,D 36 ACHARYA NIKETAN,MAYUR VIHAR I

पंजीकरण की तिथि / Date of Registration : 27/11/2011

पंजीकरण संख्या / Registration No. : MCDOLIR-0111-004990012

Name of Mother ANITA

Name of Father RAVIKUMAR

Present Address : H/NO 6/285 TRILOK PURI DELHI-110091

Permanent Address : H/NO 6/285 TRILOK PURI DELHI-110091

तिथि / Date : 25/11/2014

सील / Seal : S/Sh South Zone/पूर्वी दिल्ली नगर निगम

उप–रजिस्ट्रार / रजिस्ट्रार, जन्म व मृत्यु
Sub-Registrar / Registrar of Birth & Death
East Delhi Municipal Corporation

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